## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

## **Provider Inspection Summary**

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: AURORA RES ALT INC WITHEE HOUSE 024 (590168)

Address: 408 1ST STREET, WITHEE, WI 54498

**License Status: REGULAR** 

Licensed/Certified/Registered 06/26/1998

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History	Survey	History
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Survey ID: 0094877 End Date: 05/09/2005 Type: ABBREVIATED Purpose: VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094280 End Date: 02/22/2005 Type: ABBREVIATED Purpose: SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006382 Served 03/16/2005

		<u>Compliance</u>	
Deficiencies Cited	Subject Area	<u>Veri fied</u>	Corrected
88.03(2)(b)2	PROGRAM STATEMENT	05/09/2005	Yes
88.05(2)(a)	DIFFICULTY WALKING	05/09/2005	Yes
88.05(3)(j)	BEDROOM REQUIREMENTS	05/09/2005	Yes
88.05(4)(c)1	EXITING FROM THE FIRST FLOOR	05/09/2005	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.